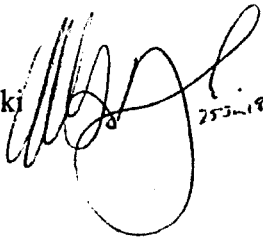




MEMORANDUM NOTE DE SERVICE

TO À Paul Rochon

FROM DE Edward Poznanski


25 Jan 18

SUBJECT OBJET Request to extend a Special Leave Without Pay

Security classification	Classification de sécurité
PROTECTED (Very limited distribution)	
Originator	Auteur
Michelle Hebert	
Our file	Notre référence
WEBCIMS2018FIN467839	
Your file	Votre référence
Date	
JAN 25 2018	

For action. Your signature is requested by February 2, 2018 on the Leave Application and Absence Report for the extension to the Special Leave Without Pay (SLWOP) of [REDACTED] from the Tax Policy Branch (TPB), for an additional week covering the period of February 3, 2018 to February 9, 2018.

According to Finance's HR delegation instrument, only the Deputy Minister has the discretionary authority to approve SLWOP. Andrew Marsland, Senior Assistant Deputy Minister, TPB, supports this request for extension and has signed the recommended section of the Leave Application and Absence Report.

It is recommended that you approve and sign the attached Leave Application and Absence Report for [REDACTED] in the Business Income Tax Division, TPB. The extension to the SLWOP is to continue his employment with the [REDACTED] for an additional week. [REDACTED] SLWOP was scheduled to end on February 3, 2018 and the extension would be for the period of February 3, 2018 to February 9, 2018.

Considerations

Section 12 of Appendix C of the *Treasury Board Directive on Executive Compensation* allows for leave without pay for any purpose not otherwise specified in the Directive. There is no maximum time limit associated with this type of leave.

Department's obligations regarding [REDACTED]

[REDACTED] is to return to his substantive position at the conclusion of his SLWOP.

Edward Poznanski 613-369-3595
Dominic Bastien 613-369-3517

Canada

Pension contribution

As [REDACTED] is not on an assignment as a result of the International Assignment Program (IAP), he will continue to be responsible for paying both the employee and employer portions of the pension contributions for the period of his leave extension, if the leave is approved.

Attachment (2):

- Leave application and Absence report – [REDACTED]
- Initial Memo – Special Leave Without Pay Request

s.19(1)



Department of Finance Canada
Ministère des Finances Canada

MEMORANDUM NOTE DE SERVICE

Security classification	Classification de sécurité
PROTECTED	
Originator/Telephone number	Auteur/Numéro de téléphone
Michelle Hebert	
Our file	Notre référence
Your file	Votre référence
WEBCIMS : 2017FIN455365	
Date	

TO
À Paul Rochon

FROM
DE Edward Poznanski

SUBJECT
OBJET **Request to Extend a Special Leave Without Pay**

For action. Your signature is requested by the OECD by May 19, 2017 on the Leave Application and Absence Report for the extension to the Special Leave Without Pay (SLWOP) of [REDACTED] from the Tax Policy Branch (TPB), for the period of September 2, 2017 to February 3, 2018.

According to Finance's HR delegation instrument, only the Deputy Minister has the discretionary authority to approve SLWOP. Andrew Marsland, Senior Assistant Deputy Minister, TPB, supports this leave and has signed the recommended section of the Leave Application and Absence Report.

It is recommended that you approve and sign the attached Leave Application and Absence Report for [REDACTED] in the Business Income Tax Division, TPB. The extension to the SLWOP is to continue his employment with [REDACTED] original SLWOP was for the period of January 1, 2016 to September 1, 2017 and the extension would be for the period of September 2, 2017 to February 3, 2018.

Your signature is requested by the OECD before May 19, 2017 to confirm [REDACTED] employment extension.

Considerations

Section 12 of Appendix C of the *Treasury Board Directive on Executive Compensation* allows for leave without pay for any purpose not otherwise specified in the Directive. There is no maximum time limit associated with this type of leave.

Department's obligations regarding [REDACTED]

According to Appendix B of the *Directive on Leave and Special Working Arrangements*, a person appointed to the core public administration on leave without pay can be replaced on an

ADM: Edward Poznanski (613-369-3595)
Director: Dominic Bastien (613-369-3517)

Canada



Government
of Canada

Gouvernement
du Canada

Leave Application and Absence Report
Demande de congé et rapport d'absence

PROTECTED
PROTÉGÉ

Personal information will be protected under the provisions of the Privacy Act.
Les renseignements personnels seront protégés en vertu de la Loi sur la protection des renseignements personnels.

Privacy Statement

Provision of the information requested on this form is required to comply with the provisions of the Financial Administration Act, paragraph 11(2)(d). The personal information will be used in the administration of your leave and attendance requests. Refusal to complete this form may result in your supervisor not being able to approve the requested leave, and failure to report to duty or absence without authorized leave may result in disciplinary action. The information is maintained in Personal Information Bank number PWGSC PSE 803 (Attendance and Leave) and is protected in accordance with the provisions of the Privacy Act. Under the Act, you have the right to request access and correction to your personal information, if erroneous or incomplete. The records are retained for two years following the last administrative action and then destroyed.

Énoncé concernant la protection des renseignements personnels

La communication des renseignements demandés est exigée conformément à l'article 11(2)(d) de la Loi sur l'administration des finances publiques. Les renseignements personnels que vous fournirez serviront à administrer vos demandes de congé. Si vous refusez de remplir le formulaire, votre superviseur pourrait être dans l'impossibilité d'approuver le congé demandé, et le fait de ne pas vous présenter au travail ou d'être absent sans autorisation risque d'entraîner des mesures disciplinaires. Les renseignements sont versés au fichier de renseignements personnels numéro PDE TPSGC 803 (Présences et congés) et sont protégés conformément aux dispositions de la Loi sur la protection des renseignements personnels. Aux termes de la Loi, l'employé(e) a le droit de se faire communiquer les renseignements personnels qui le/la concernent et de demander leur correction s'ils sont erronés ou incomplets. Les renseignements sont conservés pendant une période de deux ans après la dernière action administrative, puis ils sont détruits.

Type of application - Genre de demande <input type="checkbox"/> Original or Première ou <input checked="" type="checkbox"/> Amendment to original Modification de la première demande	Complete if amendment - Remplir seulement s'il s'agit d'une modification	Type of Leave (Code) Type de congé (Code)	Date of original request Date de la première demande
Employee Surname - Nom de famille de l'employé	Given Names - Prénoms	Personal Record Identifier Code d'identification du dossier personnel	Paylist No. N° paye 0770

Department - Ministère Finance	Branch/Division/Section - Direction/Division/Section Tax Policy Branch/Business Income Tax	Address - Adresse 90 Elgin street, Ottawa, ON
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Type	Code	From - De		To - À		Hours and decimals Heures et décimales
		Hour Heure	Y-A M D-J	Hour Heure	Y-A M D-J	
Vacation Vacances	110					
Sick (Uncertified) Congé de maladie (sans certificat)	210					
Sick certified Congé de maladie (avec certificat)	220					
Sick without pay Congé de maladie non payé	230					
Furlough Congé d'ancienneté	310					
Compensatory Compensatoire	810					

OTHER LEAVE TYPES - AUTRES TYPES DE CONGÉ

Family related responsibilities Obligations familiales						
Other Paid leave Autre congé payé						
Leave without pay Congé non payé	999		2018-02-03		2018-02-09	

For all other leave types requested, give reason(s) here and/or quote article and sub-article of applicable agreement.

Pour tout autre type de congés, indiquez ci-dessous le (les) raison(s) et/ou citez l'article de la convention collective applicable.

Section 12 of Appendix C of the Treasury Board Directive on Executive Compensation allows for a leave without pay for any purpose not otherwise specified in the Directive.

Sick leave declaration: I declare on my honour that due to illness or injury, I was incapable of performing the duties of my position during the entire period of absence for which leave is requested as indicated.

Déclaration de congé de maladie: Je déclare sur mon honneur avoir été incapable, par suite de maladie ou de blessure, de remplir les fonctions de mon poste durant toute la période d'absence pour laquelle j'ai demandé un congé.

Physicians certificate form N41W 500 - Certificat médical, formule SBS 500.

- ☐ Completed and attached
Rempli et annexé ☐ To follow
À suivre
- ☐ Unobtainable - statement attached
Impossible à obtenir - déclaration annexée

Employee's signature - Signature de l'employé(e) _____ Date _____

I request leave as stated above
Je demande un congé pour la raison indiquée ci-dessus

Compressed work week ☐ Yes ☒ No
Semaine de travail comprimée ☐ Oui ☒ Non

Employee's signature - Signature de l'employé(e) _____ Date 17 Jan 2018

Recommended - Recommandé

Supervisor's signature - Signature du superviseur _____ Date JAN 19 2018

Report of accident on duty
Rapport relatif à un accident durant les heures de service

- ☐ Attached
Annexé ☒ To follow
À suivre ☐ Previously submitted
Soumis antérieurement

Approved by authorized officer - Approuvé par l'agent autorisé

Signature _____ Date 25-01-2018

Leave recorded
Congé enregistré

Initials - Initiales _____ Date _____

Pay form (if applicable)
Formule de paye (au besoin)

Initials - Initiales _____ Date _____



LEAVE APPLICATION AND ABSENCE REPORT
DEMANDE DE CONGÉ ET RAPPORT D'ABSENCE

Type of application - Genre de demande		If amendment, please indicate type of leave (code) and start date of original request Si s'agit d'une modification, veuillez indiquer le type de congé (code) et la date de la première demande		Y-A	M	D-J
<input type="checkbox"/> Original or Première ou	<input type="checkbox"/> Amendment to original Modification de la première demande	TYPE OF LEAVE (CODE) TYPE DE CONGÉ (CODE)		Date of original request Date de la première demande		

Surname (Print) - Nom de famille (en majuscules)	Given name/Initials - Prénom/Initiales	PR - CDP
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Department - Ministère FIN	Branch/Division/Section - Direction/Division/Section Tax Policy Branch	Address - Adresse 90 Elgin Street., Ottawa, ON, K1A 0G5
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Type	Code	From - Du			To - Au			Days Jours	OR OU	Hours and decimals (ex. 0000.000) Heures et décimales (ex. 0000.000)
		Hour - Heures (ex. 00:00)	Y-A	M	D-J	Hour - Heures (ex. 00:00)	Y-A	M	D-J	
Vacation Vacances	110									
Sick (Uncertified) Congé de maladie (sans certificat)	210									
Sick certified Congé de maladie (avec certificat)	220									
Sick without pay Congé de maladie non payé	230									
Furlough Congé d'ancienneté	310									
Compensatory Compensatoire	810									

FOR ALL OTHER LEAVE TYPES SEE REVERSE - VOIR AU VERSO POUR TOUT AUTRE TYPE DE CONGÉ

Family related responsibilities Obligations familiales										
Other paid leave Autre congé payé										
Leave without pay Congé non payé	999		2017-09-02			2018-02-03				

For all other leave types requested, give reason(s) here and/or quote article and sub-article of applicable collective agreement.
Pour tout autre type de congés, indiquez ci-dessous le (les) raison(s) et/ou citez l'article de la convention collective applicable.

Section 12 of Appendix C of the Treasury Board Directive on Executive Compensation allows for a leave without pay for any purpose not otherwise specified in the Directive.

Sick leave declaration: I declare on my honour that due to illness or injury, I was incapable of performing the duties of my position during the entire period of absence for which leave is requested as indicated. Déclaration de congé de maladie: Je déclare sur mon honneur avoir été incapable, par suite de maladie ou de blessure, de remplir les fonctions de mon poste durant toute la période d'absence pour laquelle j'ai demandé un congé. Physician's certificate form N14W 500 - certificat médical, formule SBS 500. <input type="checkbox"/> Completed and attached Rempli et annexé <input type="checkbox"/> Unobtainable - statement attached Impossible à obtenir - déclaration annexée		Recommendation - Recommandé Supervisor's - Signature - du superviseur Date: 18/1/10	
<input type="checkbox"/> Attached Annexé <input checked="" type="checkbox"/> To follow À suivre <input type="checkbox"/> Previously submitted Soumis antérieurement		Report of accident on duty Rapport relatif à un accident durant les heures de service	
Approved by authorized officer - Approuvé par l'agent autorisé Signature Date: MAY 18 2017			
Employee's - Signature - de l'employé(e) I request leave as stated above Je demande un congé pour la raison indiquée ci-dessus Compressed work week Semaine de travail comprimée <input type="checkbox"/> Yes Oui <input checked="" type="checkbox"/> No Non Employee's - Signature - de l'employé(e) Date: 3 May 2017		Leave Credits Solde de congés Code Code Hours Heures Init. Date	
		Leave recorded Congé enregistré Init. Date	
		Pay form (if applicable) Formule de paye (au besoin) Init. Date	

indeterminate basis if the period of leave or consecutive periods of the same type of leave exceeds one year.

Should [REDACTED] current substantive position be staffed on an indeterminate basis while on SLWOP, he would be entitled, in accordance with sub-section 41(1) of the Public Service Employment Act (PSEA), to a leave of absence priority appointment to a position within the Public Service, for which he is found qualified. The priority period would be for the duration of his leave of absence and a further period of one year. After that date, if he has not been appointed in the Public Service, he will lose his priority status and also cease to be an employee. [REDACTED]

Pension contribution

This leave is considered as in the primary interest of the employee since the employee has sought out the opportunity for his own professional growth and development. As [REDACTED] is not going on an assignment as a result of the International Assignment Program (IAP), he will be responsible for paying both the employee and employer portions of the pension contributions for the period of his leave, if the leave is approved.

Attachment (2):

- Leave application and Absence report – [REDACTED]
- Initial Memo – Special Leave Without Pay Request

(FOLD HERE) (PLIER ICI)



Department of Finance
Canada

Ministère des Finances
Canada

For Signature by / Information of À signer par / Pour l'information de	
Deputy Minister	
Prepared by (name/initials/division) Préparé par (nom/initiales/division)	
Michelle Hebert	
In consultation with (name/initials/branch(es)/division(s)) En consultation avec (nom/initiales/direction(s)/division(s))	
Approved by Approuvé par	
Director Directeur	Dominic Bastien
General director Directeur général	Janelle Wright
Assistant Deputy Minister Sous-ministre adjoint	Edward Poznanski
Associate Deputy Minister & G7 Deputy for Canada Sous-ministre délégué et représentant du Canada au G7	Rob Stewart
Associate Deputy Minister Sous-ministre déléguée	
Deputy Minister Sous-ministre	Paul Rochon
Remarks Remarques:	
Attached, for your signature, is an extension to a Leave Application and Absence Report form.	
According to Finance's HR delegation instrument, only the Deputy Minister has the authority to approve special leave without pay for the EX group.	
Once signed, please return the document(s) to Liette Hotte, Human Resources Administrator, Human Resources and Security Directorate, 10th Floor.	
File no. No de dossier	Date
2018FIN467839	JAN 25 2018

Associate Deputy Minister & G7 Deputy for Canada Sous-ministre délégué et représentant (Sign on behalf of DM) du Canada au G7 (Signer au nom du SM)	<input type="checkbox"/>
Associate Deputy Minister Sous-ministre déléguée (Sign on behalf of DM) (Signer au nom du SM)	<input type="checkbox"/>
Assistant Deputy Minister Sous-ministre adjoint(e) (Sign on behalf of DM) (Signer au nom du SM)	<input type="checkbox"/>